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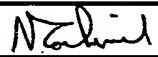
TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	Attorney Docket Number	5853-400
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ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): POSTCARD
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	AKERMAN SENTERFITT		
Signature			
Printed name	NICHOLAS A. ZACHARIADES, PH.D.		
Date	January 25, 2006	Reg. No.	56,712

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	NICHOLAS A. ZACHARIADES, PH.D.	Date	January 25, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of SHAW et al.

Application No. 10/810,388

Examiner: Gucker, Stephen

Filed: March 26, 2004

Group: 1649

For: ASSESSING NEURONAL DAMAGE FROM BLOOD SAMPLES

CERTIFICATE OF TRANSMISSION/MAILING

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Reg. No. 56,712

Nicholas A. Zachariades, Ph.D.

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
PURSUANT TO 37 CFR §1.97(b)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to the duty of disclosure under 37 C.F.R. §1.56, the references cited on the accompanying form PTO/SB/08B are hereby brought to the attention of the Examiner for independent evaluation. Submission of the listed documents is not intended as an admission that any such documents constitute prior art against the claims of the present application. Applicant does not waive any right to take any action that would be appropriate to antedate or otherwise remove any listed document as a competent reference against the claims of the present application.

Applicant respectfully requests that the listed documents be considered by the Examiner and made of record in the present application and that an initialed copy of form PTO/SB/08B be returned in accordance with MPEP §609.

This Supplemental Information Disclosure Statement is being filed prior to the issuance of the first Office Action and this paper is thus submitted in accordance with 37 CFR §1.97(b).

Accordingly, no fee is believed to be due; however, the Commissioner for Patents is hereby authorized to charge any underpayment in fees to Deposit Account No. 50-0951.

Respectfully submitted,

Dated: January 25, 2006

Docket No. 5853-400


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PTO/SB/08B (08-03)

Approved for use through 07/31/2006. OMB 0651-0031
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Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet

1

of

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Complete if Known	
Application Number	10/810,388
Filing Date	March 26, 2004
First Named Inventor	SHAW et al.
Art Unit	1614
Examiner Name	
Attorney Docket Number 5853-400	

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
		HORNBECK et al., Enzyme-Linked Immunosorbent Assays, Current Protocols in Molecular Biol., 11.2.1-11.2.22 (1991)	
		Pierce Catalog, pgs. C-7, C-22, C-23, C-36, C-37 (1992)	
		POSMANTUR et al., Neurofilament 68 and Neurofilament 200 Protein Levels Decrease After Traumatic Brain Injury, J. of Neurotrauma, vol. 11, no. 5 (1994)	
		NYLEN et al., Cerebrospinal Fluid Neurofilament and Glial Fibrillary Acidic Protein in Patients with Cerebral Vasculitis, J. of Neuroscience Research, 67:844-851 (2002)	
		HU et al., Elevated Levels of Phosphorylated Neurofilament Proteins in Cerebrospinal Fluid of Alzheimer Disease Patients, Neuroscience Letters, 320:156-160 (2002)	

Examiner Signature	Date Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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